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Bib Data Sheet

CONFIRMATION NO. 9032

|  |   |                               |                               |  |                                   |   |  |  |                                      |                                 |
|--|---|-------------------------------|-------------------------------|--|-----------------------------------|---|--|--|--------------------------------------|---------------------------------|
| <b>SERIAL NUMBER</b><br>09/955,467   | <b>FILING DATE</b><br>09/17/2001<br><b>RULE</b>   | <b>CLASS</b><br>248           | <b>GROUP ART UNIT</b><br>3632 | <b>ATTORNEY DOCKET NO.</b><br>81451CIP |                                   |   |  |  |                                      |                                 |
| <b>APPLICANTS</b><br>Henry J. Riblet, Melvin Village, NH;<br><b>** CONTINUING DATA *****</b><br>THIS APPLICATION IS A CIP OF 09/477,660 01/05/2000 ABN <i>Non 7/25/02</i><br><b>** FOREIGN APPLICATIONS *****</b><br><i>Non-Non</i><br><b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY **</b><br><b>** 10/28/2001</b>  |   |                               |                               |  |                                   |   |  |  |                                      |                                 |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met <i>Allowance</i><br>Verified and Acknowledged <i>Non</i><br>Examiner's Signature _____ Initials _____ |   | <b>STATE OR COUNTRY</b><br>NH | <b>SHEETS DRAWING</b><br>7    | <b>TOTAL CLAIMS</b><br>189             | <b>INDEPENDENT CLAIMS</b><br>4    |   |  |  |                                      |                                 |
| <b>ADDRESS</b><br>23685  |   |                               |                               |  |                                   |   |  |  |                                      |                                 |
| <b>TITLE</b><br>Bracket assembly lock  |   |                               |                               |  |                                   |   |  |  |                                      |                                 |
| <b>FILING FEE RECEIVED</b><br>477  | <b>FEES:</b> Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: <table border="1"> <tr><td><input type="checkbox"/> All Fees</td></tr> <tr><td><input type="checkbox"/> 1.16 Fees ( Filing )</td></tr> <tr><td><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</td></tr> <tr><td><input type="checkbox"/> 1.18 Fees ( Issue )</td></tr> <tr><td><input type="checkbox"/> Other _____</td></tr> <tr><td><input type="checkbox"/> Credit</td></tr> </table> |                               |                               |  | <input type="checkbox"/> All Fees | <input type="checkbox"/> 1.16 Fees ( Filing ) | <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) | <input type="checkbox"/> 1.18 Fees ( Issue ) | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Credit |
| <input type="checkbox"/> All Fees  |   |                               |                               |  |                                   |   |  |  |                                      |                                 |
| <input type="checkbox"/> 1.16 Fees ( Filing )  |   |                               |                               |  |                                   |   |  |  |                                      |                                 |
| <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )   |   |                               |                               |  |                                   |   |  |  |                                      |                                 |
| <input type="checkbox"/> 1.18 Fees ( Issue )   |   |                               |                               |  |                                   |   |  |  |                                      |                                 |
| <input type="checkbox"/> Other _____   |   |                               |                               |  |                                   |   |  |  |                                      |                                 |
| <input type="checkbox"/> Credit  |   |                               |                               |  |                                   |   |  |  |                                      |                                 |